



# WHITMAN

Corporate Headquarters  
116 Tices Lane, Unit B-1  
East Brunswick, NJ 08816

Tel: 732.390.5858 • Fax: 732.390.9496  
www.whitmanco.com

August 29, 2011

Bureau of Case Assignment & Initial Notice  
New Jersey Department of Environmental Protection  
Site Remediation Program  
401 East State Street, P.O. Box 434  
Trenton, NJ 08625

Attn: Joshua Gradwohl

RE: Extension Request for Preliminary Assessment/Site Investigation/Remedial Investigation  
Chemical Compounds, Inc.  
22-75 Riverside Avenue, Block 614, Lots 62, 66 and 67  
Newark, Essex County, New Jersey  
**Whitman Project #07-11-15T**  
**Incident #11-02-11-1549-04**  
**ISRA #E20090027; PI #G000004354**

Dear Mr. Gradwohl:

Enclosed please find the completed Remediation Timeframe Extension Request form for the above-referenced facility. This request is for an unassigned ISRA case.

As noted on the attached form, additional Remedial Investigation activities are currently ongoing on the property. At completion of these activities and evaluation of the data, the Preliminary Assessment/Site Investigation/Remedial Investigation Report with Remedial Investigation Workplan and Remedial Action Workplan will be submitted to the New Jersey Department of Environmental Protection (NJDEP). We anticipate submittal of this document by no later than December 2011.

If you have any question or comments, please do not hesitate to contact our office at 732-390-5858.

Respectfully yours,

Brett Iwicki  
Project Scientist

Enclosures

cc: Eric Celleri, Celcor Associates, LLC  
Stephen Geller, Esq., Himelman, Wertheim & Geller, LLC  
Jessica Trifiro, LEED AP, Whitman

531121

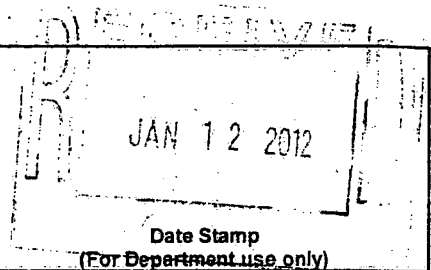




New Jersey Department of Environmental Protection  
Site Remediation Program

GENERAL INFORMATION NOTICE (GIN)

☐ New ☒ Revision/Update \*



NOTE: If more than one Industrial Establishment (business) operates at the site (multiple tenancy), and the transaction which initiates ISRA is a sale of property, then a separate General Information Notice is required for each Industrial Establishment (tenant) that uses hazardous materials and has a NAICS number within the subject realm of ISRA.

Date: 01/03/2012

SECTION A. INDUSTRIAL ESTABLISHMENT

Site Name: Chemical Compounds, Inc.

Telephone Number: (973) 485-3211

Street Address: 29-75 Riverside Avenue, Building #9

Municipality: Newark

(Township, Borough or City)

County: Essex

Zip Code: 07104

\* ISRA Case No.: E2009027 E20090027

Program Interest No.: G000004354

State Plane Coordinates for a central location at the site: Easting: 586434

Northing: 704151

Municipal Block(s) and Lot(s): Block # 614

Lot # 62

Block # Lot # Block # Lot #

Block # Lot # Block # Lot #

Block # Lot # Block # Lot #

Block # Lot # Block # Lot #

Does the Industrial Establishment include: ☒ the Entire Site; or

☐ a Leasehold Portion of the Block and Lots designated above.

Date trigger compliance with N.J.A.C. 7:26B-3.2(a) 01/20/2009

NAICS Code: 325998 (Required)

To determine your NAICS Code, please refer to the "Official NAICS Page" at <http://www.census.gov/eos/www/naics/> or contact the NJ Department of Labor at 609-292-2633.

Please provide a description of operations conducted on site by the Industrial Establishment listed in "A" above to verify the listed NAICS number as accurate.

Manufacturing of specialty hair dyes, creams, and bleaches for retail and private sale.

CURRENT PROPERTY OWNER(S)

Business Name: Celcor Associates, LLC

Contact Person: Alberto Celleri

Telephone Number: (973) 485-3211

Street Address: 29-75 Riverside Avenue, Building #9

Municipality: Newark

State: New Jersey

Zip Code: 07104

CURRENT BUSINESS OWNER (complete this section even if the same as above)

Business Name: Chemical Compounds, Inc. (Note: operations have ceased)

Contact Person: Alberto Celleri

Telephone Number: (973) 485-3211

Street Address: 29-75 Riverside Avenue, Building #9

Municipality: Newark

State: New Jersey

Zip Code: 07104

**SECTION B. MAPS TO PROVIDE**

1. A current tax map, attached as Appendix # 1 and
2. A scaled site map showing the entire property and all current structures located on the blocks and lots listed in Item 1A above. For Department data entry and identification purposes the boundaries of each industrial establishment currently located on the site shall be highlighted and clearly labeled on the scaled site map, attached as Appendix # 2

**SECTION C. PREVIOUS ISRA/ECRA SUBMISSIONS**

1. Have there been any previous or concurrent ISRA/ECRA submissions (including Applicability Determinations or De Minimis Quantity Exemption Application) by this Industrial Establishment or another Industrial Establishment, which occupied the same tax block and lot number? ..... ☒ Yes ☐ No
2. If "Yes," Name of Industrial Establishment(s): Chemical Compounds, Inc.
3. ISRA/ECRA Case No(s): E98132 Current Status NFA

**SECTION D. NFA, RAO OR NEGATIVE DECLARATION**

1. Has the same property occupied by the Industrial Establishment in section A above received a No Further Action Letter (NFA), Response Action Outcome (RAO) or Negative Declaration Approval? ..... ☒ Yes ☐ No  
If "Yes," provide:

2. A copy of the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval, attached as Appendix # 3 and
3. A scaled site map, which clearly depicts the site or portions thereof that the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval includes, attached as Appendix # 4

**Please Note:** If the Block and Lot designation for the site on which the Industrial Establishment listed above is different than the Block and Lot listed on the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval, then please provide a brief description of when the designation change occurred and a statement supporting that the current application is for the same site. The Department will not assume the application for the current site is the same site referenced on a prior no further action approval if the Block and Lots are different.

**SECTION E. TYPE OF TRANSACTION**

Indicate the transaction(s), which initiates the ISRA review. Check all that apply (see N.J.A.C. 7:26B-3.2 & 3.3):

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Sale of Property                                   | <input type="checkbox"/> Foreclosure        | <input type="checkbox"/> Stock Transfer/Corporate Merger         |
| <input checked="" type="checkbox"/> Cessation                               | <input type="checkbox"/> Partnership Change | <input type="checkbox"/> Other (attach documentation to explain) |
| <input type="checkbox"/> Sale of Business                                   | <input type="checkbox"/> Sale of Assets     |  |
| <input type="checkbox"/> Bankruptcy - Type: _____ Date: _____ Case #: _____ |   |  |

**SECTION F. CESSATION OF OPERATIONS**

If a cessation of operations is involved at this location, provide the following information:

1. Provide the date of the public release of the decision to close the facility \_\_\_\_\_, or
2. Provide the date that operations ceased 01/20/2009, or
3. Provide the date that operations will cease \_\_\_\_\_

**SECTION G. PROPERTY SALE/TRANSFER OF TITLE**

If the transaction initiating an ISRA review is an agreement of sale or execution of an option to purchase, fill in the date of execution of that instrument below. If a sales agreement has not been signed, then you may not have triggered ISRA unless another trigger such as a cessation of operations has also occurred.

1. Is a sale involved? ..... ☐ Yes ☒ No (If "No," skip to section H.)
2. Provide the date of the Agreement/Notifications of Option to Purchase \_\_\_\_\_
3. Provide the date proposed for transfer of title \_\_\_\_\_
4. Please complete the following:

Name of Party/Purchaser: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**SECTION H. AUTHORIZED AGENT**

Provide the name and mailing address of an individual to be designated as the "Authorized Agent": a primary contact with the Department for all matters relating to this ISRA review. This can be a licensed site remediation professional or attorney assisting the owner or operator with their ISRA compliance obligations. The Department will copy the Authorized Agent on all written correspondence.

Name: Michael MettitzTelephone Number: (732) 390-5858Firm: WhitmanStreet Address: 116 Tices Lane, Unit B-1Municipality: East BrunswickState: New JerseyZip Code: 08816Fax Number: (732) 390-9496Email Address (optional): mmettitz@whitmanco.com**SECTION I. NOTIFICATIONS (To be initialed by the signatory on the certification page.)****Right of Entry and Inspection**

Pursuant to the Industrial Site Recovery Act rules (N.J.A.C. 7:26B-1.9), by the submission and certification of this document I give my consent to the entry of the industrial establishment by the Department and its authorized representatives during any phase of remediation, upon the presentation of credentials, to inspect the site.

Initial AE**Withdrawal Notification**

I understand that I may withdraw this notice if the transaction that initiated the filing of this General Information Notice is terminated. In accordance with the Industrial Site Recovery Act rules (N.J.A.C. 7:26B-3.4), such withdrawal, stating the reasons why compliance with ISRA no longer applies to the site referenced in Item 1A above, shall be made in writing and certified in accordance with N.J.A.C. 7:26B-1.6. I understand if the site has been confirmed to be contaminated, pursuant to the Site Remediation Reform Act, I am obligated to continue with the remediation of the site regardless of the status of my ISRA trigger.

Initial AE**Municipal Notification**

I certify that the municipality (Municipal Clerk), in which the industrial establishment named in Item 1A above is located, has been provided a copy of this notice.

Initial AE**SECTION J. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION**Full Legal Name of the Person Responsible for Conducting the Remediation: Chemical Compounds, Inc.Representative First Name: AlbertoRepresentative Last Name: CelleriTitle: President/OwnerPhone Number: (973) 485-3211

Ext: \_\_\_\_\_

Fax: (973) 485-0031Mailing Address: 29-75 Riverside Avenue, Building #9City/Town: NewarkState: New JerseyZip Code: 07104Email Address: celleri@celleri.netDoes the listed individual or firm own the: ☐ property, ☐ business, or ☒ both?

This certification shall be signed by the responsible party who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).

*I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, including all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, to the best of my knowledge, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.*

Signature: Alberto CelleriDate: Jan 12/2012Name/Title: Alberto Celleri/President and OwnerNo Changes Since Last Submittal ☐

## **APPENDIX 1**

### **TAX MAP**



New Jersey Department of Environmental Protection  
Site Remediation Program

LSRP NOTIFICATION OF RETENTION OR DISMISSAL

JAN 12 2012

Date Stamp  
(For Department use only)

SECTION A. SITE NAME AND LOCATION

Site Name: Chemical Compounds, Inc.

List all AKAs: \_\_\_\_\_

Street Address: 29-75 Riverside Avenue, Building #9, Block 614, Lot 62

Municipality: Newark (Township, Borough or City)

County: Essex Zip Code: 07104

Program Interest (PI) Number(s): G000004354 Case Tracking Number(s): E20090027

SECTION B. RETENTION INFORMATION

I was retained by Chemical Compounds, Inc. to serve as the licensed site remediation professional for the remediation at the site on 12/29/2011.

I replaced another LSRP: \_\_\_\_\_ ☐ Yes ☒ No

Provide name of replaced/released LSRP: \_\_\_\_\_

SECTION C. RELEASE INFORMATION

I was released by \_\_\_\_\_ from service as the licensed site remediation professional for remediation at the site on \_\_\_\_\_.

**Note:** The release notification is only required if it occurs prior to the issuance of the response action outcome for the site by the LSRP.

SECTION D. LICENSED SITE REMEDIATION PROFESSIONAL INFORMATION AND STATEMENT

LSRP ID Number: 509374

First Name: Michael Last Name: Metlitz

Phone Number: (732) 390-5858 Ext: 231 Fax: (732) 390-9496

Mailing Address: 116 Tices Lane, Unit B-1

City/Town: East Brunswick State: New Jersey Zip Code: 08816

Email Address: mmetlitz@whitmanco.com

This statement shall be signed by the LSRP who is submitting this notification in accordance with N.J.S.A. 58:10C-16d and N.J.S.A. 58:10B-1.3b(2).

*I certify that I am a Licensed Site Remediation Professional authorized pursuant to N.J.S.A. 58:10C to conduct business in New Jersey. I am aware pursuant to N.J.S.A. 58:10C-17 that for purposely, knowingly or recklessly submitting false statement, representation or certification in any document or information submitted to the board or Department, etc., that there are significant civil, administrative and criminal penalties, including license revocation or suspension, fines and being punished by imprisonment for conviction of a crime of the third degree.*

LSRP Signature: \_\_\_\_\_  
LSRP Name/Title: Michael Metlitz/Vice President

Date: 1/10/2012

No Changes Since Last Submittal ☐

Company Name: Whitman

**SECTION E. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION**

Full Legal Name of the Person Responsible for Conducting the Remediation: Chemical Compounds, Inc.

Representative First Name: Alberto

Representative Last Name: Celleri

Title: President/Owner

Phone Number: (973) 485-3211

Ext: \_\_\_\_\_

Fax: (973) 485-0031

Mailing Address: 29-75 Riverside Avenue, Building #9

City/Town: Newark

State: New Jersey

Zip Code: 07104

Email Address: celleri@celleri.net

1. I am a prospective purchaser of the subject site ..... ☐ Yes ☒ No

2. I am hiring a LSRP to address an unregulated heating oil tank(s) only ..... ☐ Yes ☒ No

3. I maintain I have a defense to spill act liability pursuant to N.J.S.A. 58:10-23.11gd because I am a (select one):

☐ Government Entity

☐ Lender

☐ Innocent Purchaser

☐ Developer

4. I am hiring a LSRP to meet licensing requirements for a child care center on this site ..... ☐ Yes ☒ No

If "Yes," indicate if you are the ☐ property owner or ☐ tenant.

5. This site is or may be impacting a school, childcare center or residence ..... ☐ Yes ☒ No

6. I am taking over remediation from the Department or another party ..... ☐ Yes ☒ No

If "Yes," indicate name of party that was previously conducting remediation:

If "Yes," the party who I am taking over from agrees that I will conduct the remediation. .... ☐ Yes ☐ No

7. Total number of contaminated AOC(s) on site known at this time: 3

8. I have hired a LSRP to address:

☒ the entire site based upon a PA/SI (completed or yet to be completed);

or

☐ Specific known contaminated AOC(s). Indicate the number of known contaminated

AOC(s) that this LSRP is addressing: \_\_\_\_\_

This certification shall be signed by the person responsible for conducting the remediation who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).

*I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and that to the best of my knowledge, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.*

Signature: \_\_\_\_\_

Date: JANUARY 12/2012

Name/Title: Alberto Celleri/President and Owner

## SECTION F. "OPT IN" REQUEST

Is a Case Manager assigned? ..... ☐ Yes ☒ No

If "Yes," provide name: \_\_\_\_\_

In accordance with N.J.A.C. 7:26C-2.3(b), I hereby request that the Department allow the remediation at the site identified in Section A, above, to be conducted in accordance with N.J.A.C. 7:26C-2.4. I certify that I have paid all invoiced uncontested oversight costs and applicable fees and that, if applicable, my remediation funding source has been established and maintained in an amount that reflects the estimated cost of remediation and that all applicable surcharges have been paid. I further certify that I agree to pay oversight costs incurred by the Department but not yet invoiced and, if applicable, to maintain my remediation funding source in an amount that equals the estimated cost of the remediation and to pay any required surcharge.

I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.

I understand that my submittal of this certification provides an automatic approval of this request, provided that I am eligible for approval and that the Department finds the certification to be truthful and accurate.

Signature: \_\_\_\_\_ Date: 1/6/2012

Typed/Printed Name: Alberto Cullen

Title: President and Owner

Completed forms should be sent to:

Bureau of Case Assignment & Initial Notice  
Site Remediation Program  
NJ Department of Environmental Protection  
401-05H  
PO Box 420  
Trenton, NJ 08625-0420



E2012 0009 (R) G000004354



**New Jersey Department of Environmental Protection**  
Site Remediation Program

**GENERAL INFORMATION NOTICE (GIN)**

☒ New ☐ Revision/Update \*

Date Stamp  
(For Department use only)

NOTE: If more than one Industrial Establishment (business) operates at the site (multiple tenancy), and the transaction which initiates ISRA is a sale of property, then a separate General Information Notice is required for each Industrial Establishment (tenant) that uses hazardous materials and has a NAICS number within the subject realm of ISRA.

Date: 01/03/2012

**SECTION A. INDUSTRIAL ESTABLISHMENT**

Site Name: Chemical Compounds, Inc.

Telephone Number: (973) 485-3211

Street Address: 29-75 Riverside Avenue, Building #17

Municipality: Newark (Township, Borough or City)

County: Essex Zip Code: 07104

\* ISRA Case No.: Program Interest No.:

State Plane Coordinates for a central location at the site: Easting: 586424 Northing: 703803

Municipal Block(s) and Lot(s): Block # 614 Lot # 66

Block # 614 Lot # 67 Block # Lot #

Block # Lot # Block # Lot #

Block # Lot # Block # Lot #

Block # Lot # Block # Lot #

Does the Industrial Establishment include: ☒ the Entire Site; or  
☐ a Leasehold Portion of the Block and Lots designated above.

Date trigger compliance with N.J.A.C. 7:26B-3.2(a) 01/20/2009

NAICS Code: 325998 (Required)

To determine your NAICS Code, please refer to the "Official NAICS Page" at <http://www.census.gov/eos/www/naics/> or contact the NJ Department of Labor at 609-292-2633.

Please provide a description of operations conducted on site by the Industrial Establishment listed in "A" above to verify the listed NAICS number as accurate.

Manufacturing of specialty hair dyes, creams, and bleaches for retail and private sale.

**CURRENT PROPERTY OWNER(S)**

Business Name: Chemical Compounds, Inc. (Lot 66) and Celcor Associates, LLC (Lot 67)

Contact Person: Alberto Celleri Telephone Number: (973) 485-3211

Street Address: 29-75 Riverside Avenue, Building #9

Municipality: Newark State: New Jersey Zip Code: 07104

**CURRENT BUSINESS OWNER** (complete this section even if the same as above)

Business Name: Chemical Compounds, Inc. (Note: operations have ceased)

Contact Person: Alberto Celleri Telephone Number: (973) 485-3211

Street Address: 29-75 Riverside Avenue, Building #9

Municipality: Newark State: New Jersey Zip Code: 07104

**SECTION B. MAPS TO PROVIDE**

1. A current tax map, attached as Appendix # 1 and
2. A scaled site map showing the entire property and all current structures located on the blocks and lots listed in Item 1A above. For Department data entry and identification purposes the boundaries of each industrial establishment currently located on the site shall be highlighted and clearly labeled on the scaled site map, attached as Appendix # 2

**SECTION C. PREVIOUS ISRA/ECRA SUBMISSIONS**

1. Have there been any previous or concurrent ISRA/ECRA submissions (including Applicability Determinations or De Minimis Quantity Exemption Application) by this Industrial Establishment or another Industrial Establishment, which occupied the same tax block and lot number? ..... ☒ Yes ☐ No
2. If "Yes," Name of Industrial Establishment(s): Chemical Compounds, Inc.
3. ISRA/ECRA Case No(s): N983349 Current Status LNA (for Lot 67 only)

**SECTION D. NFA, RAO OR NEGATIVE DECLARATION**

1. Has the same property occupied by the Industrial Establishment in section A above received a No Further Action Letter (NFA), Response Action Outcome (RAO) or Negative Declaration Approval? ..... ☐ Yes ☒ No  
If "Yes," provide:

2. A copy of the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval, attached as Appendix # \_\_\_\_\_ and
3. A scaled site map, which clearly depicts the site or portions thereof that the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval includes, attached as Appendix # \_\_\_\_\_

**Please Note:** If the Block and Lot designation for the site on which the Industrial Establishment listed above is different than the Block and Lot listed on the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval, then please provide a brief description of when the designation change occurred and a statement supporting that the current application is for the same site. The Department will not assume the application for the current site is the same site referenced on a prior no further action approval if the Block and Lots are different.

**SECTION E. TYPE OF TRANSACTION**

Indicate the transaction(s), which initiates the ISRA review. Check all that apply (see N.J.A.C. 7:26B-3.2 & 3.3):

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Sale of Property                                   | <input type="checkbox"/> Foreclosure        | <input type="checkbox"/> Stock Transfer/Corporate Merger         |
| <input checked="" type="checkbox"/> Cessation                               | <input type="checkbox"/> Partnership Change | <input type="checkbox"/> Other (attach documentation to explain) |
| <input type="checkbox"/> Sale of Business                                   | <input type="checkbox"/> Sale of Assets     |  |
| <input type="checkbox"/> Bankruptcy - Type: _____ Date: _____ Case #: _____ |   |  |

**SECTION F. CESSATION OF OPERATIONS**

If a cessation of operations is involved at this location, provide the following information:

1. Provide the date of the public release of the decision to close the facility \_\_\_\_\_, or
2. Provide the date that operations ceased 01/20/2009, or
3. Provide the date that operations will cease \_\_\_\_\_

**SECTION G. PROPERTY SALE/TRANSFER OF TITLE**

If the transaction initiating an ISRA review is an agreement of sale or execution of an option to purchase, fill in the date of execution of that instrument below. If a sales agreement has not been signed, then you may not have triggered ISRA unless another trigger such as a cessation of operations has also occurred.

1. Is a sale involved? ..... ☐ Yes ☒ No (If "No," skip to section H.)
2. Provide the date of the Agreement/Notifications of Option to Purchase \_\_\_\_\_
3. Provide the date proposed for transfer of title \_\_\_\_\_
4. Please complete the following:

Name of Party/Purchaser: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**SECTION H. AUTHORIZED AGENT**

Provide the name and mailing address of an individual to be designated as the "Authorized Agent": a primary contact with the Department for all matters relating to this ISRA review. This can be a licensed site remediation professional or attorney assisting the owner or operator with their ISRA compliance obligations. The Department will copy the Authorized Agent on all written correspondence.

Name: Michael MetlitzTelephone Number: (732) 390-5858Firm: WhitmanStreet Address: 116 Tices Lane, Unit B-1Municipality: East BrunswickState: New JerseyZip Code: 08816Fax Number: (732) 390-9496Email Address (optional): mmetlitz@whitmanco.com**SECTION I. NOTIFICATIONS (To be initialed by the signatory on the certification page.)****Right of Entry and Inspection**

Pursuant to the Industrial Site Recovery Act rules (N.J.A.C. 7:26B-1.9), by the submission and certification of this document I give my consent to the entry of the industrial establishment by the Department and its authorized representatives during any phase of remediation, upon the presentation of credentials, to inspect the site.

Initial   *AM*  **Withdrawal Notification**

I understand that I may withdraw this notice if the transaction that initiated the filing of this General Information Notice is terminated. In accordance with the Industrial Site Recovery Act rules (N.J.A.C. 7:26B-3.4), such withdrawal, stating the reasons why compliance with ISRA no longer applies to the site referenced in Item 1A above, shall be made in writing and certified in accordance with N.J.A.C. 7:26B-1.6. I understand if the site has been confirmed to be contaminated, pursuant to the Site Remediation Reform Act, I am obligated to continue with the remediation of the site regardless of the status of my ISRA trigger.

Initial   *AM*  **Municipal Notification**

I certify that the municipality (Municipal Clerk), in which the industrial establishment named in Item 1A above is located, has been provided a copy of this notice.

Initial   *AM*  **SECTION J. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION**Full Legal Name of the Person Responsible for Conducting the Remediation: Chemical Compounds, Inc.Representative First Name: AlbertoRepresentative Last Name: CelleriTitle: President/OwnerPhone Number: (973) 485-3211

Ext: \_\_\_\_\_

Fax: (973) 485-0031Mailing Address: 29-75 Riverside Avenue, Building #9City/Town: NewarkState: New JerseyZip Code: 07104Email Address: celleri@celleri.netDoes the listed individual or firm own the: ☐ property, ☐ business, or ☒ both?

This certification shall be signed by the responsible party who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).

*I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, including all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, to the best of my knowledge, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.*

Signature:   *Alberto Celleri*  Date:   *JANUARY 6/2012*  Name/Title: Alberto Celleri/President and OwnerNo Changes Since Last Submittal ☐

## **APPENDIX 2**

### **SITE MAP**

01	28.41
02	28.42
03	90.00
04	24
05	31.54
06	12
07	50
08	41.26
09	23
10	44.72

Avenue East

617

Place

Riverside Ave.

Mc Carter Highway

McC

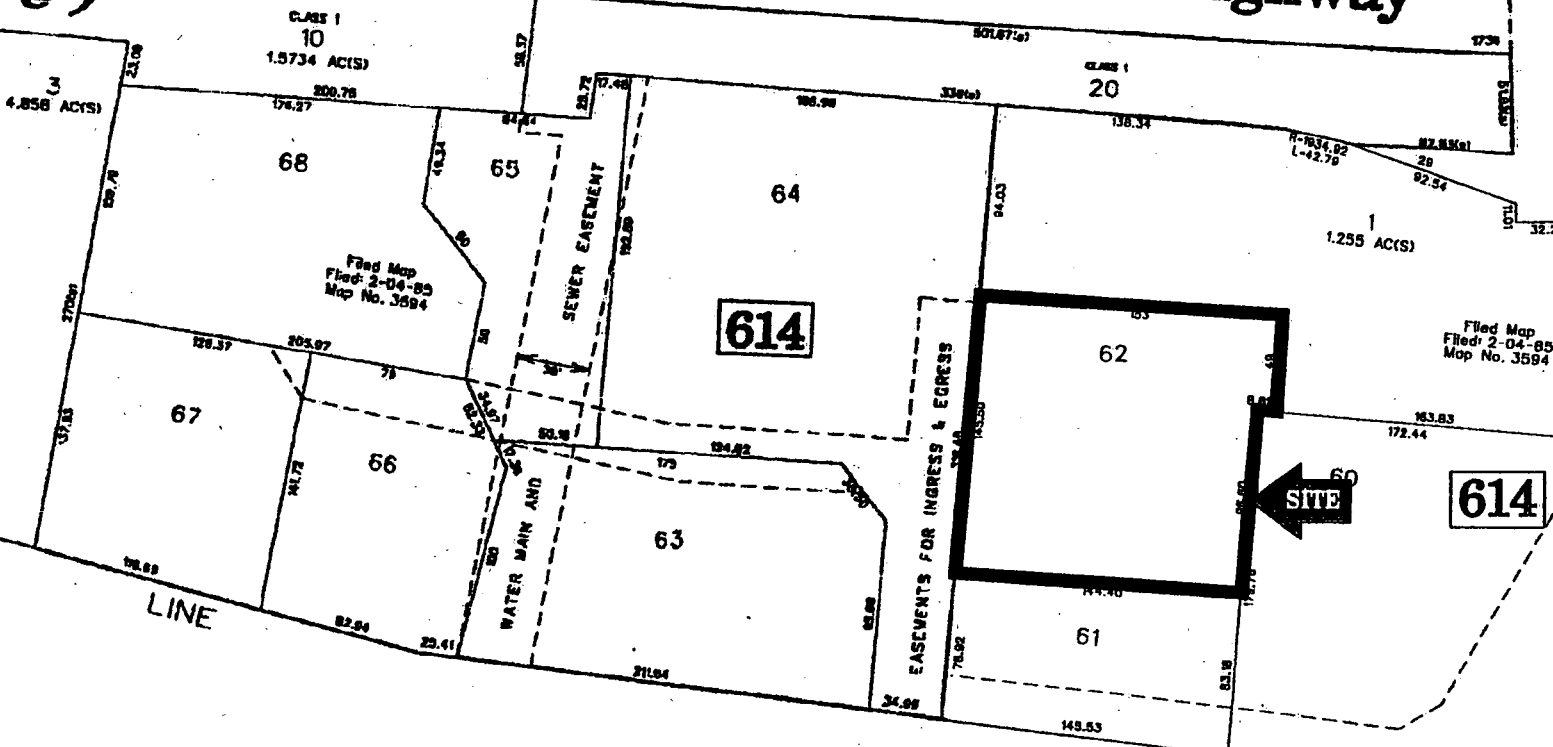
Line)

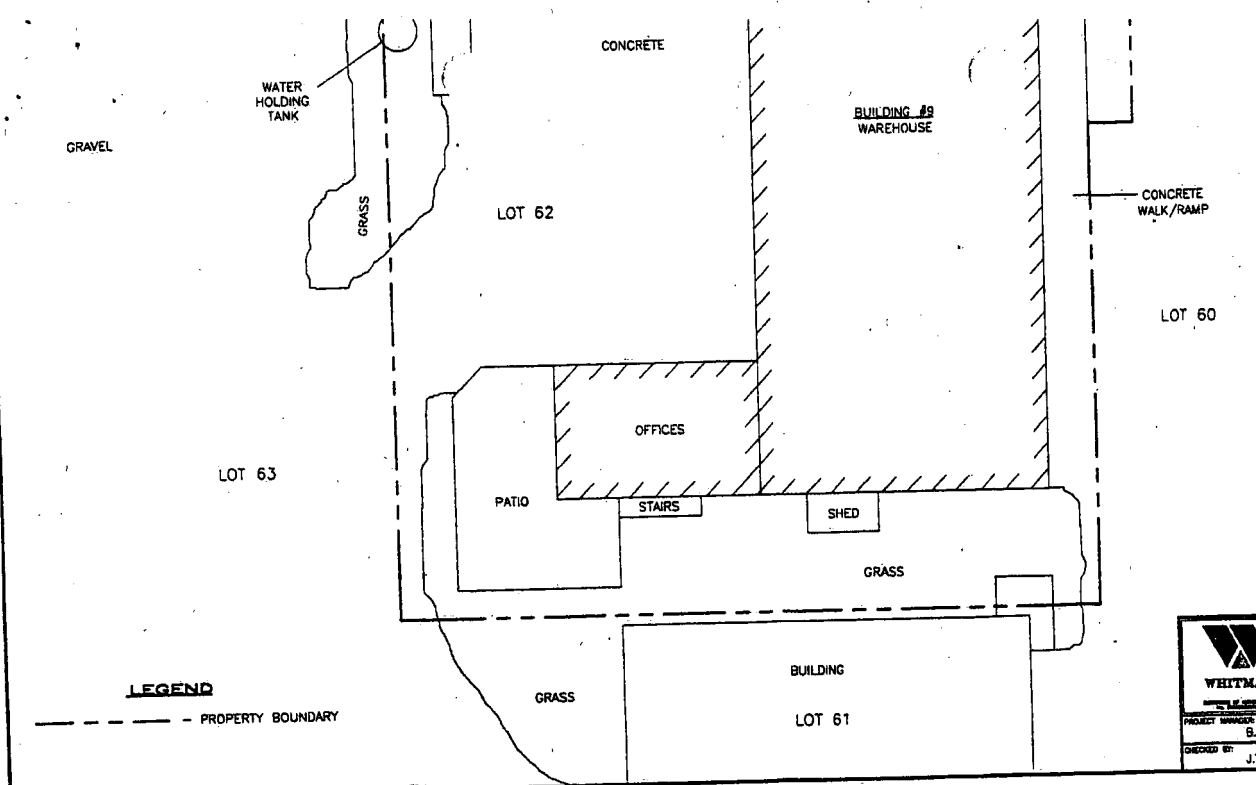
Rive

614

614

SITE





Z:\WHITMAN\2007\07-11-15\071115 - Fig 2 -Building 9 Site Map.dwg

**APPENDIX 3**

**JUNE 15, 1998 NFA LETTER**



**WHITMAN**



Christine Todd Whitman  
Governor

State of New Jersey  
Department of Environmental Protection  
Bureau of Field Operations  
ISRA Initial Notice  
P.O. Box 435  
401 East State Street 5th Floor  
Trenton, NJ 08625-0435

Robert C. Shinn, Jr.  
Commissioner

JUN 15 1998

William H. Evans, General Manager  
Industrial Development Associates  
141 Lanza Avenue  
Garfield, NJ 07026

RE: Entire Site, Unrestricted Use No Further Action Letter and Covenant Not to Sue  
Industrial Establishment: Chemical Compounds, Inc.  
Location: 29-75 Riverside Avenue, Building 9, Newark, Essex County  
Block: 814 Lot: 62  
ISRA Case #E98132  
Transaction(s): Sale of property  
Negative Declaration Affidavit dated May 28, 1998

Dear Mr. Evans:

Pursuant to N.J.S.A. 58:10B-13.1 and N.J.A.C. 7:26C, the New Jersey Department of Environmental Protection (Department) makes the determination that no further action is necessary for the remediation of the industrial establishment as specifically referenced above, except as noted below, so long as William H. Evans did not withhold any information from the Department. This action is based upon information in the Department's case file and William H. Evans's affidavit dated May 28, 1998. In issuing this No Further Action Determination and Covenant Not to Sue, the Department has relied upon the certified representations and information provided to the Department.

By issuance of this No Further Action Determination, the Department acknowledges the completion of a Preliminary Assessment pursuant to the Technical Requirements for Site Remediation (N.J.A.C. 7:26E) for the entire site.

**NO FURTHER ACTION CONDITIONS**

As a condition of this No Further Action Determination William H. Evans as well as each subsequent owner, lessee and operator (collectively "Successor") shall comply with each of the following:

**Name and Address Change**

Pursuant to N.J.S.A. 58:10B-12, William H. Evans and the Successors shall inform the Department in writing whenever its name or address changes, within 14 calendar days after the change.



### COVENANT NOT TO SUE

The Department issues this Covenant Not to Sue pursuant to N.J.S.A. 58:10B-13.1. That statute requires a covenant not to sue with each no further action letter. However, in accordance with N.J.S.A. 58:10B-13.1, nothing in this Covenant shall benefit any person who is liable, pursuant to the Spill Compensation and Control Act (Spill Act), N.J.S.A. 58:10-23.11, for cleanup and removal costs and the Department makes no representation by the issuance of this Covenant, either express or implied, as to the Spill Act liability of any person.

The Department covenants, except as provided in the preceding paragraph, that it will not bring any civil action against the following:

- (a) the person who undertook the remediation;
- (b) subsequent owners of the subject property;
- (c) subsequent lessees of the subject property; and
- (d) subsequent operators at the subject property,

for the purposes of requiring remediation to address contamination which existed prior to the date of the affidavit for the real property at industrial establishment/site identified above, or payment of cleanup and removal costs for such additional remediation.

Pursuant to N.J.S.A. 58:10B-13.1d, this Covenant does not relieve any person from the obligation to comply in the future with laws and regulations. The Department reserves its right to take all appropriate enforcement for any failure to do so.

The Department may revoke this Covenant at any time after providing notice upon its determination that either:

- (a) any person with legal obligation to comply with any condition in this No Further Action Letter has failed to do so; or
- (b) any person with legal obligation to maintain or monitor any engineering or institutional controls has failed to do so.

This Covenant Not to Sue, which the Department has executed in duplicate, shall take effect immediately once the person who undertook the remediation has signed and dated the Covenant Not to Sue in the lines supplied below and the Department has received one copy of this document with original signatures of the Department and the person who undertook the remediation.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Dated: \_\_\_\_\_

NEW JERSEY DEPARTMENT OF  
ENVIRONMENTAL PROTECTION

Name: Vincent S. Krisak

Signature:  \_\_\_\_\_

Title: Section Chief

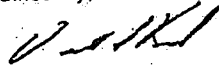
Dated: 6-18-93

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Thank you for the attention to these matters. If you have any questions, please contact Ron Wianckoski at (609) 292-1866.

Sincerely,



Vincent S. Krisak, Section Chief  
Bureau of Field Operations

C: Dr. Michael Festa, Health Officer  
Ron Wianckoski, BFO-IN  
Christopher Nueffer, Envirotactics, Inc.

**APPENDIX 4**  
**NFA BOUNDARY**  
**SITE MAP**

GRAVEL

WATER  
HOLDING  
TANK

GRASS

CONCRETE

BUILDING #9  
WAREHOUSE

CONCRETE  
WALK/RAMP

LOT 60

LOT 62

OFFICES

PATIO

STAIRS

SHED

GRASS

LOT 63

GRASS

BUILDING

LOT 61

**LEGEND**

- - PROPERTY BOUNDARY  
--- - NFA BOUNDARY

